

REMARKS

The above amendment with the following remarks is submitted to be fully responsive to the Official Action of November 14, 2005. Reconsideration of this application in light of the amendment and the allowance of this application are respectfully requested.

Claims 1-37 were pending in the present application prior to the above amendment. Independent claim 26 has been allowed in the previous Office Action, while claims 27-37 have been withdrawn from consideration. In response to the Office Action, claims 1, 12 and 21-23 have been amended, while claims 2 and 11 have been canceled. Correspondingly, claims 1, 3-10, and 12-37 are still pending in the present application.

Referring now to the Office Action, claims 1-8, 10-12, and 19 were rejected under 35 U.S.C. 102(e) as being anticipated by U.S. Patent No. 5,556,411 to Taoda et al. The Examiner asserts that Taoda discloses all of the limitations of the rejected claims. The Applicants respectfully disagree for the reasons set forth hereinbelow. In particular, the trocar assembly disclosed in Taoda does not include a distal ring that engages an internal wall, or a fixing means for a removably securing the cannula in position on the patient as specifically recited in independent claim 1. In contrast to the Examiner's assertion, Taoda clearly teaches that the disclosed trocar is used from outside the body, and does not provide a fixing means of the present invention. In particular, it is noted that Taoda discloses an adhesive layer 52 provided at a bottom of the cannula-retaining member 5 which is for adhering to the patient's skin surface. Notably, this adhesive layer is positioned on the opposite side of the cannula-retaining member 5 which does not face the proximal end 22 of the trocar assembly 1. In addition, Taoda does not disclose a gas-tight cap for the cannula in that it clearly teaches that there is a small gap between lumen 44 and the trocar needle 3. (See Figure 1 and Col. 3, lines 55-58). Such gap does not provide a gas-tight interface. Thus, the Examiner's interpretation of the Taoda reference is incorrect, and the Applicants contend that this rejection of independent claim 1 is improper.

In addition, the cited reference also fails to disclose other features of the various dependent claims rejected. For example, Taoda fails to disclose an extension shoulder as

recited in dependent claim 4 in that the proximal end 22 is not on the trocar needle 3, but instead, on the sheath 4. In addition, Taoda fails to disclose a valve to prevent loss of gas as specifically recited in dependent claim 9, or an anchor ring with a thread for engaging the same thread used to secure the trocar as recited in dependent claim 11. In view of the above, the Applicants respectfully contend that the cited Taoda reference fails to disclose each and every limitation of claims 1-8, 10-12, and 19, and requests the withdrawal of this rejection.

However, to expedite the prosecution of the present application, independent claim 1 has been amended to specifically recite that the cannula has an outer surface with a threaded portion, and a distal ring that extends substantially perpendicularly from the outer surface, the distal ring engaging an internal wall when the surgical device is in use. In addition, independent claim 1 has also been amended to specifically recite that the trocar is removably carried on the cannula, and that it engages and covers the threaded portion when carried on the cannula. Moreover, claim 1 has been further amended to recite that the fixing means engages the threaded portion of the cannula upon removal of the trocar. Clearly, the cited Taoda reference fails to disclose, teach, or otherwise suggest, the surgical device with the limitations specifically recited in independent claim 1 as amended above. Correspondingly, the withdrawal of this rejection, and the allowance of claims 1, 3-8, 10-12, and 19 are respectfully requested, claims 3-8, 10-12, and 19 being ultimately dependent on amended independent claim 1 as described above.

Referring again to the Office Action, claims 9, 13-25 were rejected under 35 U.S.C. 103(a) as being unpatentable over Taoda discussed above, in further view of U.S. Patent No. 5,743,881 to Demco. This rejection relative to dependent claims 9, 13-20, and 22-25 are believed to be rendered moot in view of the above amendments to independent claim 1 upon which these claims ultimately depend. In particular, Demco does not cure the deficiencies of the primary Taoda reference. Correspondingly, even if Taoda and Demco references are combined in the manner suggested by the Examiner, they fail to disclose, teach, or otherwise suggest a surgical device is now recited in independent claim 1. Correspondingly, the withdrawal of this rejection relative to claims 9, 13-20, and 22-25 are respectfully requested.

In addition, in response to the Examiner's rejection of independent claim 21, this claim has been amended above to specifically recite that the cannula has an outer surface with a securement means thereon, that the trocar is removably carried on the cannula, the trocar engaging and covering the securement means when carried on the cannula, and that the fixing means is removably secured to the cannula upon removal of the trocar, the fixing means engaging the securement means of the cannula. Clearly, the cited combination of references fail to disclose, teach, or otherwise suggest, the surgical device as now recited in independent claim 21. Correspondingly, the withdrawal of this rejection and the allowance of claim 21 are respectfully requested.

In view of the foregoing, it is submitted that the present application is in condition for allowance and a notice to that effect is respectfully requested. However, if any issue remains after considering this response, the Examiner is invited to call the undersigned to expedite the prosecution and work out any such issue by telephone.

Respectfully submitted,



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